

Fill in this information to identify the case:

Debtor name Salem Services Group, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) 16-30919

Check if this is an amended filing

Official Form 202

## Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 30, 2016

X /s/ Gary Moore

Signature of individual signing on behalf of debtor

Gary Moore

Printed name

Managing Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

**12/15**

**Part 1: Summary of Assets**

**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

**1a. Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

**1b. Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **29,966.08**

**1c. Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **29,966.08**

**Part 2: Summary of Liabilities**

**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **366,337.78**

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **4,697.26**

**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **1,284,237.43**

**4. Total liabilities** .....  
Lines 2 + 3a + 3b

\$ **1,655,272.47**

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
BB&T Operating/Checking Account <i>(ending in 8139)</i>	Checking	8139	\$0.00

BB&T Payroll Checking Account <i>(ending in 8120)</i>	Checking	8120	\$0.00
--	----------	------	--------

Wells Fargo Business Checking <i>(account ending in 5643)</i>	Checking	5643	\$10,069.01
--	----------	------	-------------

4. Other cash equivalents (*Identify all*)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$10,069.01

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.

Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

Debtor Salem Services Group, LLC  
Name

Case number (*If known*) 16-30919

No. Go to Part 4.  
 Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less:	<u>0.00</u>	-	<u>0.00</u>	= ....	<u>Unknown</u>
face amount			doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>166.34</u>	-	<u>0.00</u>	= ....	<u>\$166.34</u>
face amount			doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>630.73</u>	-	<u>0.00</u>	= ....	<u>\$630.73</u>
face amount			doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$797.07

Part 4: **Investments**

13. Does the debtor own any investments?

No. Go to Part 5.  
 Yes Fill in the information below.

Part 5: **Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.  
 Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	---	---	------------------------------------

19. **Raw materials**

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

**Sage 100 Contractor**

**Software**

\$0.00

Unknown

**Miscellaneous Inventory,  
Tools, Equipment in  
Warehouse**

Unknown

Unknown

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$0.00

24. **Is any of the property listed in Part 5 perishable?**

No  
 Yes

Debtor Salem Services Group, LLC Case number (*If known*) 16-30919  
 Name \_\_\_\_\_

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No

Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.

Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

39. Office furniture

(1) Reception Desk; (1) 2-Door Cabinet; (2) Leather Chairs; (2) End Tables; (1) Conference Table; (8) Bookshelves; (7) Desks; (3) Credenzas; (1) 5-Drawer Lateral File Cabinet; (1) 4-Drawer Lateral File Cabinet; (2) 4-Drawer File Cabinets; (1) 2-Drawer File Cabinet; (3) Drafting Tables; (1) Drafting Stool; (6) Miscellaneous Tables; (12) Rolling Office Chairs; (8) Arm Chairs; (3) Executive Desk Chairs

(1) Folding Table; (4) Office Desks (2 dark wood tone/2 light gray formica); (3) Black Leather Swivel Office Chairs; (8) Gray Cushioned Folding Chairs; (1) Small 2-Drawer Dark Wood Tone Cabinet; (1) Large 2-Drawer Dark Wood Tone Cabinet; (1) 5-Shelf Upright Dark Wood Tone Bookshelf; (2) Salem Stand-Alone Upright Signs; (1) 2-Shelf Black Bookcase Cabinet; (2) Dry Erase Boards; (6) Desktop File Keepers; (1) Cork Bulletin Board; (1) Conference Table Dark Wood Tone; (1) Small 2-Drawer Plastic Container for Coffee Machine

Inventory located in Charlotte and Charleston offices

Unknown

Unknown

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software  
Leased Kyocera Copier (Model 3551CI; S/N L8H4201423)

Unknown

Unknown

Debtor Salem Services Group, LLC \_\_\_\_\_ Case number (*If known*) 16-30919 \_\_\_\_\_  
Name \_\_\_\_\_

**(6) Lenovo ThinkPad Laptops; (1) IBM ThinkPad Laptop; (5) Acer PC Monitors; (1) HP 2311x Monitor; (1) Leo Technology Monitor; (1) HP Laserjet P4014N Printer; (1) Imagistics CM2520 Copier**

**(4) AT&T Cordless Phones w/ Chargers; (1) Whirlpool Refrigerator; (1) Oster Microwave; (1) Keurig Coffee Maker; (1) Black & Decker Toaster Oven; (1) Hoover Upright Vacuum Cleaner; (1) Epson Table Top Projector with Remote; (1) Stand-Up Pull Down Video Screen; (1) Royal Paper Shredder; (1) Canon MF8080CN Printer/Copier; (1) Microsoft Computer Keypad; (1) Brother Desktop Label Maker**

Unknown

\$0.00

**Leased phone system** \$0.00 Unknown

42. **Collectibles Examples:** Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** Add lines 39 through 42. Copy the total to line 86. **\$0.00**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

No  
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

No  
 Yes

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.  
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---	---	--	---------------------------------------

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. **2006 Chevrolet Silverado 3500 Dually (VIN: 1GCJC33D96F257191). Titled in the name of Salem Contracting, Inc. Not in working condition. Located in Charleston.**

\$2,000.00

\$2,000.00

47.2. **2006 Chevrolet Silverado 2500 (VIN: 1GCHC23U76F255903). Titled in the name of Salem Contracting, Inc. Located in Charlotte.**

\$10,500.00

\$10,500.00

Debtor	<u>Salem Services Group, LLC</u> Name	Case number ( <i>If known</i> )	<u>16-30919</u>
47.3.	<b>2000 Pace Private Trailer (VIN: 4FPFB1210YGO47106).</b> Titled in the name of Salem Contracting.	<u>Unknown</u>	<u>Unknown</u>
47.4.	<b>2000 Pace Private Trailer (VIN: 4FPFB1213YG043728).</b> Titled in the name of Salem Contracting and Waterproofing, Inc.	<u>Unknown</u>	<u>Unknown</u>
47.5.	<b>2000 Pace Private Trailer (VIN: 1M9TB2026Y1543005).</b> Titled in the name of Salem Contracting & Waterproofing, Inc.	<u>Unknown</u>	<u>Unknown</u>
47.6.	<b>1999 Pace Private Trailer (VIN: 4FPFB1216XG031538).</b> Titled in the name of Salem Contracting & Waterproofing, Inc.	<u>Unknown</u>	<u>Unknown</u>
47.7.	<b>2013 Permanant Multi-Year Trailer</b>	<u>Unknown</u>	<u>Unknown</u>
47.8.	<b>2012 Triple Crown Trailer 5x8 utility (VIN: 1XNHD5X81C1037497)</b>	<u>Unknown</u>	<u>Unknown</u>
47.9.	<b>2013 Carry-On Trailer (VIN: 4YMCL1213DG028532).</b> Titled in the name of Elyse Marie Moore.	<u>Unknown</u>	<u>Unknown</u>
47.10	<b>2013 Carry-On Trailer (VIN: 4YMCL1217DG031871).</b> Titled in the name of Elyse Marie Moore.	<u>Unknown</u>	<u>Unknown</u>
47.11	<b>ST Sport II Golf Cart</b>	<u>Unknown</u>	<u>Unknown</u>
47.12	<b>2000 homemade trailer (VIN: NCX01053961).</b> Titled in the name of Salem Contracting & Waterproofing, Inc.	<u>Unknown</u>	<u>Unknown</u>
47.13	<b>2014 Carry-On Trailer 6x12 (VIN: 4YMCL1217EG011928)</b>	<u>Unknown</u>	<u>Unknown</u>
47.14	<b>2006 Ford F-150 (VIN: 1FTRW12W76FA83798).</b> Titled in the name of Matthew William Moore (located in Charleston)	<u>\$6,600.00</u>	<u>\$6,600.00</u>
48.	<b>Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		

Debtor Salem Services Group, LLC  
Name \_\_\_\_\_

Case number (*If known*) 16-30919

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

Equipment located in Charleston, SC:

Storage 1 - East Container - Inventory: (65)  
10-Foot Aluminum Walkboards; (75) 7-Foot  
Aluminum Walkboards; (124) 10-Foot Wood  
Walkboards; (21) 7-Foot Wood Walkboards; (4)  
10-Foot Aluminum Walkboards for System  
Scaffold; (5) 10-Foot Wood Walkboards for  
System Scaffold; (5) 10-Foot x 2-Foot Wide  
Walkboards; (1) 24-Foot Walk Plank  
Storage 2 - West Container - (85) Brick Jacks;  
(1) Bucket Fist Grips; (11) Yellow Gas Cans;  
(11) Red Gas Cans; Plywood, Repair Caps,  
Rebar Bender, Rebar Cutter, Ladder Jacks  
Office Sideyard: Yellow Bucks; 7 Foot Braces;  
10 Foot Braces; 7 Foot Wood Walkboards; 10  
Foot Aluminium Walkboards; 10 Foot Wood  
Walkboards; 10'x2' Walkboard; 24' Walkplank;  
5' Handrails; Hand Rail Posts; Screw Jacks;  
Nuckles; Scaffold Frames; Scaffold Braces;  
Painter Scaffold; Frame Pins; Bucket with  
Scaffold Pins

Unknown

Unknown

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$19,100.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No  
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No  
 Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

No. Go to Part 10.  
 Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.  
 Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes Fill in the information below.

Debtor Salem Services Group, LLC  
Name \_\_\_\_\_

Case number (*If known*) 16-30919

Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$10,069.01</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$797.07</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$19,100.00</u>	
88. Real property. <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$29,966.08</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$29,966.08</u>

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

## Official Form 206D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		<i>Column A</i> Amount of claim  Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
2.1	<b>BB&amp;T</b> Creditor's Name <b>P.O. Box 1847</b> <b>Attn: Bankruptcy</b> <b>Wilson, NC 27894</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Secured by UCC lien on accounts, receivables, inventory, equipment, intangibles and proceeds</b>  Describe the lien	<b>\$198,993.93</b> <b>\$0.00</b>
	Creditor's email address, if known  <b>Date debt was incurred</b>  Last 4 digits of account number <b>0001</b>  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	<b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.2	<b>Circle Lending, LLC</b> Creditor's Name <b>c/o Victory Park Capital Advisors</b> <b>227 West Monroe Street,</b> <b>Suite 3900</b> <b>Chicago, IL 60606</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Secured by a UCC lien on all equipment and other personal property</b>  Describe the lien	<b>Unknown</b> <b>\$0.00</b>
	Creditor's email address, if known  <b>Date debt was incurred</b> <b>07/17/2014</b>  Last 4 digits of account number  Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	<b>As of the petition filing date, the claim is:</b> Check all that apply

Debtor **Salem Services Group, LLC**

Case number (if known)

**16-30919**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent  
 Unliquidated  
 Disputed

**2.3 EverBank Commercial Finance, Inc.**

Creditor's Name

**10 Waterview Boulevard Parsippany, NJ 07054**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$4,067.31**

**Unknown**

**Sage 100 Contractor Software**

Describe the lien

Is the creditor an insider or related party?

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**6494**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.4 Gateway One Lending & Finance**

Creditor's Name

**TCF Bank  
160 N. Riverview Rive,  
Suite 100  
Anaheim, CA 92806**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$3,299.65**

**\$2,400.00**

**1999 Ford F-250 (VIN: 1FTMX20F2XEE28652).  
Titled in the name of Elyse Marie Moore and Michael Ryan Moore.**

Describe the lien

Is the creditor an insider or related party?

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.5 Internal Revenue Service**

Creditor's Name

**Attn.: Insolvency Unit  
P.O. Box 21126  
Philadelphia, PA  
19114-0326**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**\$136,967.97**

**Unknown**

**Federal Tax Lien - Q3 2014 941**

Describe the lien

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

**Is the creditor an insider or related party?**

No  
 Yes

**Is anyone else liable on this claim?**

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**Do multiple creditors have an interest in the same property?**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**2.6 Internal Revenue Service**

Creditor's Name

**Attn.: Insolvency Unit  
P.O. Box 21126  
Philadelphia, PA  
19114-0326**

Creditor's mailing address

**Describe debtor's property that is subject to a lien**

**\$1,576.56**

**Unknown**

**Federal Tax Lien - Q4 2014 940**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**Do multiple creditors have an interest in the same property?**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Describe the lien**

**Is the creditor an insider or related party?**

No  
 Yes

**Is anyone else liable on this claim?**

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**2.7 Marlin Business Bank**

Creditor's Name

**P.O. Box 637  
Mount Laurel, NJ 08054**

Creditor's mailing address

**Describe debtor's property that is subject to a lien**

**Unknown**

**Unknown**

**Leased phone system**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2567**

**Do multiple creditors have an interest in the same property?**

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

Contingent  
 Unliquidated  
 Disputed

**Describe the lien**

**Is the creditor an insider or related party?**

No  
 Yes

**Is anyone else liable on this claim?**

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor Salem Services Group, LLC  
Name

Case number (if known)

16-30919

2.8	<b>Wells Fargo Dealer Services</b> Creditor's Name <b>Attn: Correspondence-MAC T9017-026 P.O. Box 168048 Irving, TX 75016-8048</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>2006 Ford F-150 (VIN: 1FTRW12W76FA83798). Titled in the name of Matthew William Moore.</b>	<b>\$8,344.46</b>	<b>\$6,600.00</b>
-----	--	---	-------------------	-------------------

**Describe the lien**

**Is the creditor an insider or related party?**

No  
 Yes

**Is anyone else liable on this claim?**

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**7007**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

2.9	<b>Wells Fargo Financial Leasing</b> Creditor's Name <b>Leasing Customer Service MAC N0005-055 800 Walnut Street Des Moines, IA 50309-3605</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Leased Kyocera Copier (Model 3551CI; S/N L8H4201423)</b>	<b>\$13,087.90</b>	<b>Unknown</b>
-----	--	---	--------------------	----------------

**Describe the lien**

**Is the creditor an insider or related party?**

No  
 Yes

**Is anyone else liable on this claim?**

No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

**0000**

Do multiple creditors have an interest in the same property?

No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$366,337.78**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

Name and address

**Corporate Info Tech Corp.**  
2424 N. Davidson Street  
P.O. Box 31084  
Charlotte, NC 28205

On which line in Part 1 did  
you enter the related creditor?

Line **2.7**

Last 4 digits of  
account number for  
this entity

**EverBank Commercial Finance, Inc.**  
P.O. Box 911608  
Denver, CO 80291-1608

Line **2.3**

**FC Partners, LP**  
DBA Funding Circle Partners, LP  
One Union Street, Suite 210  
San Francisco, CA 94111

Line **2.2**

**Internal Revenue Service**  
10715 David Taylor Drive  
5 Resource Square Box 24  
Charlotte, NC 28262

Line **2.5**

**Marlin Business Bank**  
2795 E. Cottonwood Parkway  
Salt Lake City, UT 84121

Line **2.7**

**Wells Fargo**  
Business Direct  
P.O. Box 348750  
Sacramento, CA 95834

Line **2.9**

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-30919** Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		<b>Total claim</b>	<b>Priority amount</b>
2.1	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Attn.: Insolvency Unit</b> <b>P.O. Box 21126</b> <b>Philadelphia, PA 19114-0326</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$323.97</b> <b>\$323.97</b>
	Date or dates debt was incurred	Basis for the claim: <b>2015 Form 940 taxes</b>	
	Last 4 digits of account number <b>3447</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address <b>NC Department of Revenue</b> <b>Office Services Division</b> <b>Bankruptcy Unit</b> <b>P.O. Box 1168</b> <b>Raleigh, NC 27602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,291.63</b> <b>Unknown</b>
	Date or dates debt was incurred	Basis for the claim: <b>2014 withholding taxes</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Salem Services Group, LLC</b>		Case number (if known)	<b>16-30919</b>
Name				
2.3	Priority creditor's name and mailing address <b>NC Department of Revenue</b> <b>Office Services Division</b> <b>Bankruptcy Unit</b> <b>P.O. Box 1168</b> <b>Raleigh, NC 27602</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred		\$81.66    \$81.66	
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
2.4	Priority creditor's name and mailing address <b>South Carolina Department of Revenue</b> <b>P.O. Box 12265</b> <b>Columbia, SC 29211</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred		<b>Unknown    Unknown</b>	
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
2.5	Priority creditor's name and mailing address <b>Tennessee Office of Attorney General</b> <b>Bankruptcy Division</b> <b>P.O. Box 20207</b> <b>Nashville, TN 37202-0207</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred		<b>Unknown    Unknown</b>	
	Last 4 digits of account number			
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
<b>Part 2: List All Creditors with NONPRIORITY Unsecured Claims</b>				
3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.				
				<b>Amount of claim</b>
3.1	Nonpriority creditor's name and mailing address <b>A&amp;B Portable Toilets, Inc.</b> <b>2544 Alamance Church Road</b> <b>Greensboro, NC 27406</b>		<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$433.20</b>	
	Date(s) debt was incurred		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Last 4 digits of account number <u>SALEMSE</u>		<b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <b>A&amp;R Sheet Metal Works, Inc.</b> <b>945 Main Road</b> <b>Johns Island, SC 29455</b>		<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$64.02</b>	
	Date(s) debt was incurred		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Last 4 digits of account number <u>5031</u>		<b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Salem Services Group, LLC**  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**16-30919**

3.3	Nonpriority creditor's name and mailing address <b>AAA</b> <b>P.O. Box 29600</b> <b>Charlotte, NC 28229</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1543</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$641.00</b>
3.4	Nonpriority creditor's name and mailing address <b>Able Metal Fabricators, Inc.</b> <b>3441 Reno Avenue</b> <b>Charlotte, NC 28216</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>4505</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$664.95</b>
3.5	Nonpriority creditor's name and mailing address <b>ADT Security Services</b> <b>3190 S. Vaughn Way</b> <b>Aurora, CO 80014</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>7741</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$236.55</b>
3.6	Nonpriority creditor's name and mailing address <b>ADT Security Services</b> <b>3190 S. Vaughn Way</b> <b>Aurora, CO 80014</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>2428</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$118.89</b>
3.7	Nonpriority creditor's name and mailing address <b>Advanced Chemical Technologies, Inc.</b> <b>9608 N. Robinson Avenue</b> <b>Oklahoma City, OK 73114</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.36</b>
3.8	Nonpriority creditor's name and mailing address <b>Ahern Rentals, Inc.</b> <b>c/o James R. Vann, Esq.</b> <b>Vann Attorneys</b> <b>1720 Hillsborough Street, Suite 200</b> <b>Raleigh, NC 27605</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1780</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,735.61</b>
3.9	Nonpriority creditor's name and mailing address <b>Ally Financial</b> <b>Attn: Bankruptcy</b> <b>P.O. Box 130424</b> <b>Roseville, MN 55113</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>9401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Notice purposes only re repossession of 2008 Chevrolet Silverado 1500 (VIN: 3GCEC13C08G239175)</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

3.10	<p>Nonpriority creditor's name and mailing address  <b>Ally Financial</b>  <b>Attn: Bankruptcy</b>  <b>P.O. Box 130424</b>  <b>Roseville, MN 55113</b>  Date(s) debt was incurred _____  Last 4 digits of account number <u>4605</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>Deficiency for 2008 Chevrolet Silverado 3500 (VIN: 1GJK33608F184854). Titled in the name of Salem Services Group, LLC and Gary Wayne Moore.</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$21,265.26</b>
3.11	<p>Nonpriority creditor's name and mailing address  <b>ASIC</b>  <b>640-B Matthews Mint-Hill Road</b>  <b>Matthews, NC 28105</b>  Date(s) debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,788.25</b>
3.12	<p>Nonpriority creditor's name and mailing address  <b>AT&amp;T</b>  <b>P.O. Box 105262</b>  <b>Atlanta, GA 30348-5262</b>  Date(s) debt was incurred _____  Last 4 digits of account number <u>5001</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$158.11</b>
3.13	<p>Nonpriority creditor's name and mailing address  <b>B&amp;B Porta-Jons</b>  <b>104 Arundel Drive</b>  <b>Orangeburg, SC 29118</b>  Date(s) debt was incurred _____  Last 4 digits of account number <u>1517</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$244.74</b>
3.14	<p>Nonpriority creditor's name and mailing address  <b>BB&amp;T</b>  <b>P.O. Box 1847</b>  <b>Attn: Bankruptcy</b>  <b>Wilson, NC 27894</b>  Date(s) debt was incurred _____  Last 4 digits of account number <u>0005</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$172,674.57</b>
3.15	<p>Nonpriority creditor's name and mailing address  <b>BB&amp;T</b>  <b>P.O. Box 1847</b>  <b>Attn: Bankruptcy</b>  <b>Wilson, NC 27894</b>  Date(s) debt was incurred <u>04/02/2012</u>  Last 4 digits of account number <u>0001</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$198,993.93</b>
3.16	<p>Nonpriority creditor's name and mailing address  <b>BB&amp;T</b>  <b>P.O. Box 1847</b>  <b>Attn: Bankruptcy</b>  <b>Wilson, NC 27894</b>  Date(s) debt was incurred <u>08/23/2013</u>  Last 4 digits of account number <u>0005</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$172,674.57</b>

Debtor **Salem Services Group, LLC**

Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**16-30919**

3.17	Nonpriority creditor's name and mailing address <b>BB&amp;T</b> <b>P.O. Box 1847</b> <b>Attn: Bankruptcy</b> <b>Wilson, NC 27894</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>0777</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30,733.52</b>
3.18	Nonpriority creditor's name and mailing address <b>BB&amp;T</b> <b>P.O. Box 1847</b> <b>Attn: Bankruptcy</b> <b>Wilson, NC 27894</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>0785</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.19	Nonpriority creditor's name and mailing address <b>BB&amp;T</b> <b>P.O. Box 1847</b> <b>Attn: Bankruptcy</b> <b>Wilson, NC 27894</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>9619</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.20	Nonpriority creditor's name and mailing address <b>Bel-Mac Roofing, Inc.</b> <b>1996 South US 1</b> <b>Rockledge, FL 32955</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$654.50</b>
3.21	Nonpriority creditor's name and mailing address <b>Bemco, Inc.</b> <b>2255 Union Place</b> <b>Simi Valley, CA 93065</b>  Date(s) debt was incurred <u>01/10/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,100.00</b>
3.22	Nonpriority creditor's name and mailing address <b>Bond Brokers, Inc.</b> <b>6160 N. Cicero Avenue, Suite 610</b> <b>Chicago, IL 60646</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.23	Nonpriority creditor's name and mailing address <b>Brame Specialty Co, Inc.</b> <b>P.O. Box 271</b> <b>Durham, NC 27702</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>7560</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74.37</b>

Debtor	<b>Salem Services Group, LLC</b>		Case number (if known)	<b>16-30919</b>
Name				
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Buck Lumber &amp; Building Supply, Inc.</b> <b>191 Maybank Highway</b> <b>Charleston, SC 29412</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>10/2014 - 11/2014</u>			
	Last 4 digits of account number <u>          </u>		Basis for the claim: _____	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Builders Mutual Insurance Co.</b> <b>P.O. Box 150005</b> <b>Raleigh, NC 27624-0005</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>          </u>		<b>Basis for the claim: Workers' Compensation/Employer's Liability policy - cancelled effective 4/25/2016</b>	
	Last 4 digits of account number <u>1504</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Capitol Materials Coastal</b> <b>140 Winyah Road</b> <b>Conway, SC 29526-9715</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>          </u>		<b>Basis for the claim: Notice Purposes Only</b>	
	Last 4 digits of account number <u>3787</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Carolina Cool, Inc.</b> <b>Attn.: Kami Beatty</b> <b>124 Surfside Industrial Park</b> <b>Surfside Beach, SC 29575</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>02/25/2015</u>		<b>Basis for the claim: _____</b>	
	Last 4 digits of account number <u>1877</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Carolina Staffing Resources</b> <b>224 Westinghouse Blvd #601</b> <b>Charlotte, NC 28273</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>          </u>		<b>Basis for the claim: _____</b>	
	Last 4 digits of account number <u>          </u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Carolina Waste &amp; Recycling, LLC</b> <b>5265 International Boulevard #200</b> <b>North Charleston, SC 29418</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>03/30/2015</u>		<b>Basis for the claim: _____</b>	
	Last 4 digits of account number <u>0002</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Carter Chevrolet</b> <b>P.O. Box 305</b> <b>Shelby, NC 28152</b>		<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>          </u>		<b>Basis for the claim: _____</b>	
	Last 4 digits of account number <u>          </u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Salem Services Group, LLC</b>	Case number (if known)	<b>16-30919</b>
Name			
3.31	Nonpriority creditor's name and mailing address <b>Cathedral Stone Products</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.32	Nonpriority creditor's name and mailing address <b>Charleston County Treasurer 4045 Bridge View Drive North Charleston, SC 29405-7464</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$598.08</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>3200</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: <u>2015 personal property taxes</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.33	Nonpriority creditor's name and mailing address <b>CIT 301 S. Tryon Street Charlotte, NC 28282</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.34	Nonpriority creditor's name and mailing address <b>CNA Surety P.O. Box 957312 Saint Louis, MO 63195-7312</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$100.00</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>2459</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.35	Nonpriority creditor's name and mailing address <b>Coastal Federal Credit Union P.O. Box 58429 Raleigh, NC 27658</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,871.44</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>0001</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Deficiency on 2005 Ford Ecoline Van (VIN: 1FBSS31P35HA16741). Titled in the name of Gary Wayne Moore.</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.36	Nonpriority creditor's name and mailing address <b>CrossCreek General Contractors P.O. Box 364 Orangeburg, SC 29115</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,146.21</b>
	Date(s) debt was incurred _	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>6335</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

3.37	Nonpriority creditor's name and mailing address <b>CSC Automotive, Inc.</b> <b>1400 Metals Drive</b> <b>Charlotte, NC 28206</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,467.62</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>0116</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <b>Secured by mechanic's lien on five vehicles dated 10/13/14:</b> <b>3GNFK123176147796</b> <b>1FBSS31P35HA16741</b> <b>1GCHC23U76F255903</b> <b>1GCJC33D96F257191</b> <b>1GYEK63N74R272843</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address <b>DesignConditions</b> <b>P.O. Box 431</b> <b>Indian Trail, NC 28079-0410</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <b>Notice Purposes</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address <b>Eadie's Construction</b> <b>1513 SC-61</b> <b>Ridgeville, SC 29472</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,782.40</b>
	Date(s) debt was incurred <u>02/19/2015</u> Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address <b>East Caolina Automotive Services Inc.</b> <b>123 Associate Lane</b> <b>Indian Trail, NC 28079</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$616.20</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>8868</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41	Nonpriority creditor's name and mailing address <b>Eastern Supply Corporation</b> <b>c/o Erwin, Bishop, Capitano &amp; Moss, P.A.</b> <b>Attn: Scott A. Hefner, Esq.</b> <b>4521 Sharon Road, Suite 350</b> <b>Charlotte, NC 28211</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$31,987.37</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.42	Nonpriority creditor's name and mailing address <b>Elvis Service Company, Inc.</b> <b>2200 Executive Avenue</b> <b>Myrtle Beach, SC 29577</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$61.26</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>6215</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

**Salem Services Group, LLC**

Name

Case number (if known)

**16-30919**

3.43	Nonpriority creditor's name and mailing address <b>EMC Insurance Companies</b> 11020 David Taylor Drive, #205 Charlotte, NC 28262	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$11,104.57</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>1601</u>	Basis for the claim: <u>Commercial insurance policies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.44	Nonpriority creditor's name and mailing address <b>ExxonMobil Citi</b> P.O. Box 6497 Sioux Falls, SD 57117	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>9691</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.45	Nonpriority creditor's name and mailing address <b>Farmers Rentals &amp; Power Equipment</b> 678 Highway 105 Extension Boone, NC 28607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.96</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>2547</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.46	Nonpriority creditor's name and mailing address <b>Fleetcor Technologies Operating Company</b> 5445 Triangle Parkway, Suite 400 Norcross, GA 30092	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$29,745.14</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>15-CVD-19211; Judgment entered May 27, 2016</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.47	Nonpriority creditor's name and mailing address <b>Funding Circle USA</b> P.O. Box 398383 San Francisco, CA 94139	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$108,148.31</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>7875</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48	Nonpriority creditor's name and mailing address <b>Gardner Roofing</b> Attn: Amy Lloyd 1329 Swift Creek Road Hartsville, SC 29550	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.49	Nonpriority creditor's name and mailing address <b>Gary W. Moore</b> 9417 White Dove Court Charlotte, NC 28277	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Notice purposes only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Salem Services Group, LLC</b>		Case number (if known)	<b>16-30919</b>
Name				
3.50	Nonpriority creditor's name and mailing address <b>Gleissner Law Firm, LLC</b> <b>1237 Gadsden Street, Suite 200A</b> <b>Columbia, SC 29201</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,574.00	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: _____		
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.51	Nonpriority creditor's name and mailing address <b>Grand Strand Water &amp; Sewer Authority</b> <b>P.O. Box 2308</b> <b>Conway, SC 29528-2308</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: _____		
	Last 4 digits of account number <u>1003</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.52	Nonpriority creditor's name and mailing address <b>Green Acres Services, Inc.</b> <b>c/o Zachary J. Closser, Esq.</b> <b>Smith Closser, P.A.</b> <b>P.O. Box 40578</b> <b>Charleston, SC 29423-0578</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$7,327.56	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: <u>Re: 250 Island Park Drive HOA</u>		
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.53	Nonpriority creditor's name and mailing address <b>Grout Dawgs Restoration &amp; Waterproofing</b> <b>408 Glenmore Drive</b> <b>Moncks Corner, SC 29461</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$39,725.00	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred <u>08/24/2014 - 09/17/2014</u>	Basis for the claim: _____		
	Last 4 digits of account number <u>67</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.54	Nonpriority creditor's name and mailing address <b>Guaranteed Supply Company</b> <b>P.O. Box 36007</b> <b>Greensboro, NC 27416-6007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: _____		
	Last 4 digits of account number <u>7923</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.55	Nonpriority creditor's name and mailing address <b>Guardian Life Insurance Company</b> <b>7 Hanover Square</b> <b>New York, NY 10004</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,612.36	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: <u>Group plan (cancelled effective 3/1/16)</u>		
	Last 4 digits of account number <u>6061</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.56	Nonpriority creditor's name and mailing address <b>Guilford Orthopaedic and Sports Medicine</b> <b>1915 Lendew Street</b> <b>Greensboro, NC 27408</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Date(s) debt was incurred _____	Basis for the claim: _____		
	Last 4 digits of account number <u>3239</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

3.57	<p>Nonpriority creditor's name and mailing address  <b>Hanson</b>  <b>P.O. Box 842481</b>  <b>Dallas, TX 75284-2481</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>2876</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,984.15</b>
3.58	<p>Nonpriority creditor's name and mailing address  <b>HD Supply White Cap Construction Supply</b>  <b>8717 West Market Street</b>  <b>Greensboro, NC 27409</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15,438.36</b>
3.59	<p>Nonpriority creditor's name and mailing address  <b>Hertz Equipment Rental Corporation</b>  <b>14501 Hertz Quail Springs Parkway</b>  <b>Oklahoma City, OK 73134</b></p> <p>Date(s) debt was incurred <u>08/2014 - 03/2015</u></p> <p>Last 4 digits of account number <u>6449</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.60	<p>Nonpriority creditor's name and mailing address  <b>Hilton Displays, Inc.</b>  <b>125 Hillside Drive</b>  <b>Greenville, SC 29607</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>SALESER</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$740.03</b>
3.61	<p>Nonpriority creditor's name and mailing address  <b>Home Builders Association of Greater Clt</b>  <b>1850 E. 3rd Street</b>  <b>Charlotte, NC 28204</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>8599</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$535.00</b>
3.62	<p>Nonpriority creditor's name and mailing address  <b>Home Depot Credit Services</b>  <b>P.O. Box 790328</b>  <b>St. Louis, MO 63179</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.63	<p>Nonpriority creditor's name and mailing address  <b>Horry County Treasurer</b>  <b>P.O. Box 1828</b>  <b>Conway, SC 29528-1828</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4347</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>2015 personal property taxes</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$354.68</b>

Debtor Salem Services Group, LLC  
Name

Case number (if known)

16-30919

3.64	Nonpriority creditor's name and mailing address <b>Horry Telephone Cooperative, Inc.</b> <b>P.O. Box 1820</b> <b>Conway, SC 29528-1820</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$297.75</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>8860</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.65	Nonpriority creditor's name and mailing address <b>HTC</b> <b>P.O. Box 1819</b> <b>Conway, SC 29528-1819</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>8860</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.66	Nonpriority creditor's name and mailing address <b>In The Wind, Inc.</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred <u>12/21/2014</u> Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.67	Nonpriority creditor's name and mailing address <b>Incorp Services, Inc.</b> <b>2360 Corporate Circle, Suite 400</b> <b>Henderson, NV 89074-7722</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$139.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.68	Nonpriority creditor's name and mailing address <b>Innovative Glass of America, Inc.</b> <b>102 East Fields Street</b> <b>P.O. Box 476</b> <b>Dallas, NC 28034</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$985.61</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>3075</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.69	Nonpriority creditor's name and mailing address <b>Irwin Equipment, Inc.</b> <b>8209 Lackland Road</b> <b>Saint Louis, MO 63114</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,967.50</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>8459</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.70	Nonpriority creditor's name and mailing address <b>JBBS Development, LLC</b> <b>P.O. Box 348</b> <b>Murrells Inlet, SC 29576</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Leased Business Space</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Salem Services Group, LLC</b>	Case number (if known)	<b>16-30919</b>
Name			
3.71	<b>Nonpriority creditor's name and mailing address</b> <b>Jones Blair Company, LLC</b> <b>2728 Empire Central</b> <b>Dallas, TX 75235</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.72	<b>Nonpriority creditor's name and mailing address</b> <b>Keating Roofing &amp; Sheet Metal</b> <b>P.O. Box 13562</b> <b>Charleston, SC 29422</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,888.00</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.73	<b>Nonpriority creditor's name and mailing address</b> <b>Kenseal Construction Products</b> <b>of the Carolinas, LLC</b> <b>c/o Vann Attorneys, PLLC</b> <b>1720 Hillsborough Street, Suite 200</b> <b>Raleigh, NC 27605</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$27,580.66</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> <u>Judgment 16-CVS-7318</u>	
Last 4 digits of account number <u>6817</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.74	<b>Nonpriority creditor's name and mailing address</b> <b>L&amp;W Supply</b> <b>CK Supply Myrtle Beach</b> <b>3014 Drywall Drive</b> <b>Myrtle Beach, SC 29577</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.75	<b>Nonpriority creditor's name and mailing address</b> <b>Latitude 33 Investments, LLC</b> <b>High Seas Properties, Inc.</b> <b>1030 Jenkins Road, Suite C</b> <b>Charleston, SC 29407</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.76	<b>Nonpriority creditor's name and mailing address</b> <b>Liberty Cedar, Inc.</b> <b>325 Liberty Lane</b> <b>West Kingston, RI 02892</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,785.94</b>
Date(s) debt was incurred <u>12/06/2014</u>		<b>Basis for the claim:</b> _____	
Last 4 digits of account number <u>Salem</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.77	<b>Nonpriority creditor's name and mailing address</b> <b>Lloyd Derreberry</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
Date(s) debt was incurred _____		<b>Basis for the claim:</b> _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Salem Services Group, LLC**

Name \_\_\_\_\_ Case number (if known)

**16-30919**

3.78	Nonpriority creditor's name and mailing address <b>Lloyd S. Derreberry</b> 426 Fulton Street Kings Mountain, NC 28086-2327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <b>Notice Purposes</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.79	Nonpriority creditor's name and mailing address <b>Lynn Ladder and Scaffolding</b> 4908 Highway 501 Myrtle Beach, SC 29579	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$406.88</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u><b>5784</b></u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.80	Nonpriority creditor's name and mailing address <b>Managed Pharmacy Programs</b> 10860 N. Mavinee Drive Oro Valley, AZ 85737	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$43.90</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u><b>83AB</b></u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.81	Nonpriority creditor's name and mailing address <b>Matthew W. Moore</b> 8120 Park Vista Circle Charlotte, NC 28226	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <b>Notice purposes only</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.82	Nonpriority creditor's name and mailing address <b>Mecklenburg Co Child Support Enforcement</b> 5800 Executive Center Drive, Suite 200 Charlotte, NC 28212	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u><b>9976</b></u>	Basis for the claim: <b>Notice Purposes Only</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address <b>Mecklenburg County Tax Collector</b> P.O. Box 31457 Charlotte, NC 28231-1457	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address <b>Michael R. Moore</b> 14124 Maple Hollow Lane Charlotte, NC 28227	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <b>Notice purposes only</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Salem Services Group, LLC  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

16-30919

3.85	Nonpriority creditor's name and mailing address <b>Mobile Mini, Inc.</b> 4646 E. Van Buren, 4th Floor Phoenix, AZ 85008	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,804.68</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>9019</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86	Nonpriority creditor's name and mailing address <b>NC Child Support Centralized Collections</b> P.O. Box 900012 Raleigh, NC 27675-9012	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <b>Notice Purposes Only</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87	Nonpriority creditor's name and mailing address <b>NC Division of Motor Vehicles</b> P.O. Box 29620 Raleigh, NC 27626-0620	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address <b>New South Construction Supply, LLC</b> Attn.: Suzanne Godwin 9N Kings Road Greenville, SC 29605	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,131.68</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.89	Nonpriority creditor's name and mailing address <b>Northwestern Mutual</b> 720 East Wisconsin Avenue Milwaukee, WI 53202-5797	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90	Nonpriority creditor's name and mailing address <b>Occupational Health Centers of Southwest P.A.</b> P.O. Box 82730 Atlanta, GA 30354-0730	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$144.00</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91	Nonpriority creditor's name and mailing address <b>Palmetto Masonry &amp; Landscape Supplies</b> P.O. Box 70116 North Charleston, SC 29415	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$65.10</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>2625</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Salem Services Group, LLC**  
Name

Case number (if known)

**16-30919**

3.92	<p>Nonpriority creditor's name and mailing address  <b>Pella Window and Door, LLC</b>  Attn.: Amanda Van Wyk  P.O. Box 2268  Irmo, SC 29063</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>Citadel</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$26,467.91</b>
3.93	<p>Nonpriority creditor's name and mailing address  <b>Personal Concepts</b>  c/o RMS  P.O. Box 361595  Columbus, OH 43236</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>51M3</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$456.64</b>
3.94	<p>Nonpriority creditor's name and mailing address  <b>Pneumatic Trim of Bluffton, Inc.</b>  8 Minuteman Drive  Bluffton, SC 29910</p> <p>Date(s) debt was incurred <u>12/2014 - 02/2015</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.95	<p>Nonpriority creditor's name and mailing address  <b>Polk County Child Support Enforcement</b>  231 Wolverine Trail  Mill Spring, NC 28756</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>1692</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Notice Purposes Only</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.96	<p>Nonpriority creditor's name and mailing address  <b>PPG Architectural Coatings</b>  One PPG Place  Pittsburgh, PA 15272</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,222.63</b>
3.97	<p>Nonpriority creditor's name and mailing address  <b>Quill</b>  P.O. Box 37600  Philadelphia, PA 19101-0600</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>0238</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$198.79</b>
3.98	<p>Nonpriority creditor's name and mailing address  <b>Richard Kevin Alsobrook</b>  418 N. Church Street  Manning, SC 29102</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>

Debtor **Salem Services Group, LLC**

Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**16-30919**

3.99	Nonpriority creditor's name and mailing address <b>Richbourg Rentals</b> c/o Aiken, Bridges Attn.: Matthew N. Tyler, Esq. P.O. Drawer 1931 Florence, SC 29503	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$8,006.23</b>
	Date(s) debt was incurred <u>09/2014 - 10/2014</u>	Basis for the claim: <u>2015 CP 21 1268</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100	Nonpriority creditor's name and mailing address <b>Safeworks LLC Spider</b> c/o Smith Debnam Attn: Gerald H. Groon, Jr., Esq. P.O. Box 26268 Raleigh, NC 27611-6268	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$44,716.75</b>
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>1189</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101	Nonpriority creditor's name and mailing address <b>Safeway Services, LLC</b> 3325 Hill Park Drive North Charleston, SC 29418	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$41,658.60</b>
	Date(s) debt was incurred _____	Basis for the claim: <u>2015CV01149 Judgment</u>	
	Last 4 digits of account number <u>8300</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102	Nonpriority creditor's name and mailing address <b>Santee Cooper</b> P.O. Box 188 Moncks Corner, SC 29461-0188	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>1312</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.103	Nonpriority creditor's name and mailing address <b>SC Department of Employment &amp; Workforce</b> P.O. Box 995 Columbia, SC 29202-0995	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104	Nonpriority creditor's name and mailing address <b>SC Hospital Association</b> 1000 Center Point Road Columbia, SC 29210	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$600.00</b>
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>2224</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105	Nonpriority creditor's name and mailing address <b>Social Security Administration</b> 1463 Tobias Gadson Boulevard Charleston, SC 29407	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>930A</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Salem Services Group, LLC</b>		Case number (if known)	<b>16-30919</b>
Name				
3.106 Nonpriority creditor's name and mailing address <b>Southeastern Freight Lines, Inc.</b> P.O. Box 1691 Columbia, SC 29202		As of the petition filing date, the claim is: Check all that apply.		<b>Unknown</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number <u>5117</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.107 Nonpriority creditor's name and mailing address <b>Southern Rehabilitation Network, Inc.</b> 9370 Falls of Neuse, Suite 101 Raleigh, NC 27615		As of the petition filing date, the claim is: Check all that apply.		<b>Unknown</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number <u>5694</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.108 Nonpriority creditor's name and mailing address <b>Spectrum Paint</b> 15247 E. Skelly Drive Tulsa, OK 74116-2620		As of the petition filing date, the claim is: Check all that apply.		<b>\$7,676.79</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.109 Nonpriority creditor's name and mailing address <b>Strongwall Industries, Inc.</b> 107 Chestnut Street Ridgewood, NJ 07450		As of the petition filing date, the claim is: Check all that apply.		<b>\$2,670.00</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number <u>0184</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.110 Nonpriority creditor's name and mailing address <b>Superior Automatic Fire Equipment, Inc.</b> 105 Corporate Boulevard P.O. Box 670 Indian Trail, NC 28079		As of the petition filing date, the claim is: Check all that apply.		<b>\$98.00</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number <u>9167</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.111 Nonpriority creditor's name and mailing address <b>Synchrony Bank / Lowe's</b> Attn: Bankruptcy Department P.O. Box 965060 Orlando, FL 32896-5060		As of the petition filing date, the claim is: Check all that apply.		<b>\$6,021.28</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.112 Nonpriority creditor's name and mailing address <b>Tammy Schatzel-Gordon</b> c/o Catherine Lee, Esq. 510 Glenwood Avenue, Suite 301 Raleigh, NC 27603		As of the petition filing date, the claim is: Check all that apply.		<b>Unknown</b>
		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number <u>587C</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Salem Services Group, LLC**

Case number (if known)

**16-30919**

Name

3.113	Nonpriority creditor's name and mailing address <b>TeamCraft Roofing, Inc.</b> 1316 North Long Street Salisbury, NC 28144	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$21,000.00
	Date(s) debt was incurred <u>2014</u>	Basis for the claim: __	
	Last 4 digits of account number __	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address <b>Technocom</b> 3330 Monroe Road Charlotte, NC 28205	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$108.89
	Date(s) debt was incurred __	Basis for the claim: __	
	Last 4 digits of account number <u>SS09</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address <b>Tendon Systems, LLC</b> 1255 Buford Highway, Suite 204 Suwanee, GA 30024	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,200.00
	Date(s) debt was incurred <u>09/2014</u>	Basis for the claim: __	
	Last 4 digits of account number __	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address <b>TN Department of Commerce &amp; Insurance</b> 500 James Robertson Parkway Nashville, TN 37243	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred __	Basis for the claim: <u>Notice Purposes Only</u>	
	Last 4 digits of account number __	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.117	Nonpriority creditor's name and mailing address <b>Tools and Accessories Corp.</b> 8975 Henkels Lane, Suite 710 Annapolis Junction, MD 20701	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,427.02
	Date(s) debt was incurred <u>10/2014</u>	Basis for the claim: __	
	Last 4 digits of account number <u>7643</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.118	Nonpriority creditor's name and mailing address <b>Tremco, Inc.</b> 3735 Green Road Beachwood, OH 44122	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$28,481.56
	Date(s) debt was incurred __	Basis for the claim: __	
	Last 4 digits of account number __	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.119	Nonpriority creditor's name and mailing address <b>Trimtec</b> 2455 Harrisburg Pike Grove City, OH 43123	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$405.01
	Date(s) debt was incurred __	Basis for the claim: __	
	Last 4 digits of account number <u>1982</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Salem Services Group, LLC  
Name

Case number (if known)

16-30919

3.120	Nonpriority creditor's name and mailing address <b>Union County Tax Collector</b> P.O. Box 38 Monroe, NC 28111	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$31.57</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>4122</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.121	Nonpriority creditor's name and mailing address <b>United Rentals</b> Branch 394 811 Post Street Greensboro, NC 27405-7262	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$42,448.85</b>
	Date(s) debt was incurred <u>2014</u> Last 4 digits of account number <u>4585</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.122	Nonpriority creditor's name and mailing address <b>United Welding &amp; Iron Work, LLC</b> 3539 Dewitt Lane Charlotte, NC 28217	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$8,191.00</b>
	Date(s) debt was incurred <u>04/2014 and 06/2014</u> Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.123	Nonpriority creditor's name and mailing address <b>Verizon</b> 455 Duke Drive Franklin, TN 37067	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,892.98</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>0001</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.124	Nonpriority creditor's name and mailing address <b>Vincent Cash</b> 1000 King Street Charleston, SC 29403	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.125	Nonpriority creditor's name and mailing address <b>Volvo Financial Services</b> P.O. Box 91300 Mobile, AL 36691-1300	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$19,594.32</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>2013 Volvo XC90 (VIN: YV4952CY5D1638277)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.126	Nonpriority creditor's name and mailing address <b>Waste Connections of Carolina</b> 5516 Rozzelles Ferry Road Charlotte, NC 28214	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,204.64</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>0907</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Salem Services Group, LLC**

Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**16-30919**

3.127	Nonpriority creditor's name and mailing address <b>Waste Management</b> 2625 W. Grandview Road Phoenix, AZ 85023	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$140.29</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>3478</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.128	Nonpriority creditor's name and mailing address <b>Watson Bowman Acme Corp.</b> Attn: Jeremy Juliano 95 Pineview Drive Amherst, NY 14228	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,882.31</b>
	Date(s) debt was incurred <u>9/19/2014-9/26/2014</u> Last 4 digits of account number <u>5109</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.129	Nonpriority creditor's name and mailing address <b>Williams Business Properties</b> 624-101 Matthews Mint-Hill Road Matthews, NC 28105	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Leased Business Space</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.130	Nonpriority creditor's name and mailing address <b>Wincourse Technologies</b> c/o Gerald H. Groon, Jr., Esq. Smith Debnam 4601 Six Forks Road, Suite 400 Raleigh, NC 27609	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$21,038.36</b>
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.131	Nonpriority creditor's name and mailing address <b>Yellow Pages Directories, Inc.</b> PMB# 179 6 Liberty Square Boston, MA 02109	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$475.95</b>
	Date(s) debt was incurred _____ Last 4 digits of account number <u>5192</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	ADT Security, LLC c/o Sko Brenner American P.O. Box 9320 Baldwin, NY 11510	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	-
4.2	BB & T Financial, FSB Bankcard Service Center P.O. Box 698 Wilson, NC 27894-0698	Line <u>3.17</u> <input type="checkbox"/> Not listed. Explain _____	-

Debtor	<b>Salem Services Group, LLC</b>	Case number (if known)	<b>16-30919</b>
	Name		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.3	<b>BB&amp;T 200 S. College St. 2nd Floor Charlotte, NC 28202</b>	Line <u>3.14</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.4	<b>Bernhardt &amp; Strawser, P.A. 5821 Fairview Road, Suite 100 Charlotte, NC 28209</b>	Line <u>3.46</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.5	<b>C. Hamilton Jarrett, Esq. Conner Gwyn Schneck, PLLC P.O. Box 30933 Raleigh, NC 27622</b>	Line <u>3.88</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.6	<b>Caleb M. Riser, Esq. Richardson Plowden P.O. Drawer 7788 Columbia, SC 29202</b>	Line <u>3.92</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.7	<b>Callison Tighe P.O. Box 1390 Columbia, SC 29202</b>	Line <u>3.98</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.8	<b>Capitol Materials of Savannah 305 Telfair Road P.O. Box 2847 Savannah, GA 31402-2847</b>	Line <u>3.26</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.9	<b>Cisco, Inc. 1702 Townhurst Drive Houston, TX 77043</b>	Line <u>3.58</u>	<b>4000</b>
		<input type="checkbox"/> Not listed. Explain _____	
4.10	<b>Cisco, Inc. P.O. Box 801088 Houston, TX 77280-1088</b>	Line <u>3.12</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.11	<b>Cisco, Inc. 1702 Townhurst Drive Houston, TX 77043</b>	Line <u>3.12</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.12	<b>CK Supply - Columbia 738 Mauney Drive Columbia, SC 29201</b>	Line <u>3.74</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.13	<b>Client Services, Inc. 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047</b>	Line <u>3.111</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.14	<b>D&amp;S, Ltd. 13809 Research Boulevard, Suite 800 Austin, TX 78750</b>	Line <u>3.111</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.15	<b>DeHaan &amp; Bach 25 Whitney Drive, Suite 106 P.O. Box 929 Milford, OH 45150</b>	Line <u>3.96</u>	<b>8201</b>
		<input type="checkbox"/> Not listed. Explain _____	

Debtor	Name	Case number (if known)	16-30919
	<b>Salem Services Group, LLC</b>		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.16	<b>Eastern Supply Corporation</b> P.O. Box 669753 Charlotte, NC 28266	Line <u>3.41</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.17	<b>Funding Circle</b> P.O. Box 1719 Portland, OR 97207-1719	Line <u>3.47</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.18	<b>Georgia Surety Company, Inc.</b> 10710 Sikes Place, Suite 125 Charlotte, NC 28277	Line <u>3.41</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.19	<b>Gilmore Insurance &amp; Associates</b> P.O. Box 1069 Concord, NC 28026-1069	Line <u>3.25</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.20	<b>Gleissner Law Firm, LLC</b> 1237 Gadsden Street, Suite 200A Columbia, SC 29201	Line <u>3.99</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.21	<b>Guaranteed Supply Company</b> 1211 Rotherwood Road Greensboro, NC 27406	Line <u>3.54</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.22	<b>Hertz Equipment Rental</b> P.O. Box 26360 Oklahoma City, OK 73126-0360	Line <u>3.59</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.23	<b>James L. Fretwell, Esq.</b> Rallings & Associates, PLLC 3121 Springbank Lane, Suite C Charlotte, NC 28226	Line <u>3.58</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.24	<b>Master Credit Consultants, Inc.</b> 23240 Chagrin Blvd., Suite 410 Cleveland, OH 44122	Line <u>3.128</u>  <input type="checkbox"/> Not listed. Explain _____	<u>5080</u>
4.25	<b>NACM South Atlantic</b> 6290 Edgewater Drive Orlando, FL 32810	Line <u>3.88</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.26	<b>NC Department of Revenue</b> P.O. Box 25000 Raleigh, NC 27640-0150	Line <u>2.2</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.27	<b>Pella Window &amp; Door, LLC</b> c/o Caleb M. Riser Richardson Plowden & Robinson, P.A. 1900 Barnwell Street Columbia, SC 29201	Line <u>3.92</u>  <input type="checkbox"/> Not listed. Explain _____	-
4.28	<b>Rauch-Milliken International, Inc.</b> P.O. Box 8390 Metairie, LA 70011-8390	Line <u>3.100</u>  <input type="checkbox"/> Not listed. Explain _____	-

Debtor	<b>Salem Services Group, LLC</b>	Case number (if known)	<b>16-30919</b>
	Name and mailing address		
4.29	<b>Receivable Management Services 1250 E. Diehl Road, Suite 300 P.O. Box 3099 Naperville, IL 60563</b>	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
		Line <u>3.97</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.30	<b>Safway Services, LLC N19 W24200 Riverwood Drive Waukesha, WI 53188</b>	Line <u>3.101</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.31	<b>Spider, A Division of Safeworks, LLC 365 Upland Drive Tukwila, WA 98188</b>	Line <u>3.100</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.32	<b>Steven S. McKenzie, Esq. Coffey, Chandler &amp; McKenzie, P.A. 2 North Brooks Street Manning, SC 29102</b>	Line <u>3.98</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.33	<b>Tammy L. Schatzel-Gordon 14521 Phillips Road Matthews, NC 28105-4022</b>	Line <u>3.112</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.34	<b>TeamCraft Roofing, Inc. c/o Ronnie D. Crisco, Jr., Esq. Homesley &amp; Wingo Law Group PLLC 30 South Main Street Mooresville, NC 28115</b>	Line <u>3.113</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.35	<b>The Law Offices of Mark A. Kirkorsky Attn: Kevin Skaff, Executive Acct Mgr 1119 W. Southern Avenue, 2nd Floor Mesa, AZ 85210</b>	Line <u>3.121</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.36	<b>The Regional Medical Center c/o Liza Porterfield, CFO 3000 St. Matthews Road Orangeburg, SC 29118</b>	Line <u>3.41</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.37	<b>Transworld Systems, Inc. P.O. Box 17221 Wilmington, DE 19850</b>	Line <u>3.27</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.38	<b>Union County Tax Administrator Attn: Revenue Division 500 N. Main Street, Suite 119 Monroe, NC 28112</b>	Line <u>3.120</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—
4.39	<b>VeriCore 10115 Kincey Avenue, Suite 100 Huntersville, NC 28078</b>	Line <u>3.130</u>	<b>0078</b>
		<input type="checkbox"/> Not listed. Explain _____	—
4.40	<b>Verizon P.O. Box 25505 Lehigh Valley, PA 18002-5505</b>	Line <u>3.123</u>	—
		<input type="checkbox"/> Not listed. Explain _____	—

Debtor	<b>Salem Services Group, LLC</b>	Case number (if known)	<b>16-30919</b>
	Name		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.41	<b>W. Donald Morgan, Jr.</b> <b>Don Morgan, P.C.</b> <b>P.O. Box 2056</b> <b>Columbus, GA 31902</b>	Line <u>3.115</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.42	<b>Wagner, Falconer &amp; Judd, LTD.</b> <b>Attn: Daniel J. Reich, Esq.</b> <b>325 N. Corporate Drive, Suite 100</b> <b>Brookfield, WI 53045-5828</b>	Line <u>3.101</u>	-
		<input type="checkbox"/> Not listed. Explain _____	
4.43	<b>Westchester Fire Insurance Company</b> <b>Attn: Stephen M. Haney</b> <b>436 Walnut Street WA10F</b> <b>Philadelphia, PA 19106</b>	Line <u>3.41</u>	-
		<input type="checkbox"/> Not listed. Explain _____	

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

Total of claim amounts  
5a. \$ 4,697.26

5b. Total claims from Part 2

5b. + \$ 1,284,237.43

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 1,288,934.69

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Sub-lease of office space located at 624-B Matthews-Mint Hill Road, Matthews, NC**

State the term remaining

List the contract number of any government contract

**Combine Basketball  
624-B Matthews-Mint Hill Road  
Matthews, NC 28105**

2.2. State what the contract or lease is for and the nature of the debtor's interest

**Preventative maintenance contract for HVAC**

State the term remaining

List the contract number of any government contract

**DesignConditions  
P.O. Box 431  
Indian Trail, NC 28079-0410**

2.3. State what the contract or lease is for and the nature of the debtor's interest

**Lease of Sage software**

State the term remaining

List the contract number of any government contract

**EverBank Commercial Finance, Inc.  
P.O. Box 911608  
Denver, CO 80291-1608**

2.4. State what the contract or lease is for and the nature of the debtor's interest

**Station I IH**

State the term remaining

List the contract number of any government contract

**Holiday Vacations, Inc.  
2002 Eastwood Road #106  
Wilmington, NC 28403**

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.5. State what the contract or lease is for and the nature of the debtor's interest

**Commercial lease for property located at 3931 Mega Drive, Unit 10, Myrtle Beach, SC 29588**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**JEBS Development, LLC  
P.O. Box 348  
Murrells Inlet, SC 29576**

2.6. State what the contract or lease is for and the nature of the debtor's interest

**Commercial lease for property located at 2487 Ashley River Road, Suite 21, Charleston, NC 29414**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Latitude 33 Investments, LLC  
High Seas Properties, Inc.  
1030 Jenkins Road, Suite C  
Charleston, SC 29407**

2.7. State what the contract or lease is for and the nature of the debtor's interest

**Phone System - Debtor to Reject**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Marlin Business Bank  
P.O. Box 637  
Mount Laurel, NJ 08054**

2.8. State what the contract or lease is for and the nature of the debtor's interest

**Rented containers - Debtor to reject**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Mobile Mini, Inc.  
4646 E. Van Buren, 4th Floor  
Phoenix, AZ 85008**

2.9. State what the contract or lease is for and the nature of the debtor's interest

**Service of Kyocera Copier**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Technocom  
3330 Monroe Road  
Charlotte, NC 28205**

2.10. State what the contract or lease is for and the nature of the debtor's interest

**Contract for waste removal services**

State the term remaining \_\_\_\_\_

**Unknown**

**Waste Connections of Carolina  
5516 Rozzelles Ferry Road  
Charlotte, NC 28214**

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

List the contract number of any government contract \_\_\_\_\_

2.11. State what the contract or lease is for and the nature of the debtor's interest

**Copier lease - Debtor to Reject**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Wells Fargo**

2.12. State what the contract or lease is for and the nature of the debtor's interest

**Commercial lease for property located at 624 Matthews-Mint Hill Road, Suite A, Matthews, NC 28105**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Williams Business Properties, LLC  
624-101 Matthews-Mint Hill Road  
Matthews, NC 28105**

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
------	-----------------	------	---------------------------------

2.1	<b>Gary Moore</b>	<b>9417 White Dove Court Charlotte, NC 28277-9021</b>	<b>Marlin Business Bank</b>	<input checked="" type="checkbox"/> D <u>2.7</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
-----	-------------------	---	---------------------------------	--

2.2	<b>Matt Moore</b>	<b>Latitude 33 Investments, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.75</u> <input type="checkbox"/> G _____
-----	-------------------	---	---

2.3	<b>Michael Moore</b>	<b>624-A Matthews Mint-Hill Road Matthews, NC 28105</b>	<b>JEBS Development, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.70</u> <input type="checkbox"/> G _____
-----	----------------------	---	----------------------------------	---

2.4	<b>Matthew W. Moore</b>	<b>8120 Park Vista Circle Charlotte, NC 28226</b>	<b>Latitude 33 Investments, LLC</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.7</u>
-----	-----------------------------	---	---	--

2.5	<b>Mike Moore</b>	<b>14124 Maple Hollow Lane Charlotte, NC 28227</b>	<b>JEBS Development, LLC</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
-----	-------------------	--	----------------------------------	--

Fill in this information to identify the case:

Debtor name **Salem Services Group, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-30919**

Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

**04/16**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

**Sources of revenue**  
Check all that apply

**Gross revenue**  
(before deductions and exclusions)

**From the beginning of the fiscal year to filing date:**

From **1/01/2016** to **Filing Date**

Operating a business

**2013 Gross Income from operation of business**

**Unknown**

Other

**For prior year:**

From **1/01/2015** to **12/31/2015**

Operating a business

**2014 Gross Income from operation of business**

**Unknown**

Other

**For year before that:**

From **1/01/2014** to **12/31/2014**

Operating a business

**2015 Year to Date Gross Income from operation of business**

**\$8,273,025.00**

Other

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. <b>Safway Services, LLC</b> 3325 Hill Park Drive North Charleston, SC 29418		Unknown	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Judgment creditor</u>
3.2. <b>Kenseal Construction Products of the Carolinas, LLC</b> c/o Vann Attorneys, PLLC 1720 Hillsborough Street, Suite 200 Raleigh, NC 27605		\$2,500.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. <b>Williams Business Properties, LLC</b> 624-101 Matthews-Mint Hill Road Matthews, NC 28105		\$3,900.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Leased office space</u>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>Gary W. Moore</b> 9417 White Dove Court Charlotte, NC 28277 Principal	Multiple	Unknown	<b>Reimbursement of expenses</b>
4.2. <b>Matthew W. Moore</b> 8120 Park Vista Circle Charlotte, NC 28226 Employee/Principal's son	Multiple	Unknown	<b>Reimbursement of expenses</b>

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Describe of the Property	Date	Value of property
Ally P.O. Box 380902 Minneapolis, MN 55438-0902	2008 Chevy Silverado (VIN#: 1GJK33608F184854)	Around April 27, 2016	Unknown

Creditor's name and address	Describe of the Property	Date	Value of property
Ally P.O. Box 380902 Bloomington, MN 55438-0902	2008 Chevy Silverado (VIN#: 3GCEC13C08G239175)	About April 26, 2016	Unknown
Coastal Federal Credit Union	2005 Ford Econoline Van (VIN: 1FBSS31P35HA16741)	2016	\$5,500.00

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Safway Services, LLC vs. Salem Services Group, LLC 2015-CV-001149	Collection	State of Wisconsin Circuit Court, Waukesha	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Safway Services, LLC vs. Salem Services Group, LLC 16-CVS-3693	Collection	Mecklenburg County Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3. Kenseal Construction Products of Carolinas, LLC vs. Salem Services Group 16-CVS-7318	Collection - Judgment entered April 26, 2016	Mecklenburg County Superior Court	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.4. Kenseal Construction Products of Carolinas, LLC vs. Salem Services Group, LLC 15-CVS-6817	Collections	Wake County Superior Court	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.5. NC Department of Commerce Division of Employment Security - Appeals Section; Appeals Docket No.: CII-A-05875 In the matter of: Salem Services Group, LLC (Employer) and Tammy Schatzel-Gordon (Claimant) CII-A-05875	Claim for unemployment benefits	NC Department of Commerce Division of Emp	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6. New South Supply, LLC vs. Salem Services Group, LLC 15-CVM-16159	Collection	Mecklenburg County General Court of Just	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.7. RCE, LLC d/b/a Richbourg's Rentals; Case No.: 2015 CP 21 1268 2015 CP 21 1268	Collection	South Carolina Court of Common Pleas	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.8. Fleetcor Technologies Operating Company, LLC vs. Salem Services Group, LLC 15-CVD-19211	Collections	Mecklenburg County District Court	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
2006 Chevrolet Dually	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).  Claim ending in 4659 field with EMC Insurance	03/2016	\$0.00

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. David R. Badger, P.A. 2108 South Boulevard Suite 118, Atherton Lofts Charlotte, NC 28203	\$10,000.00 retainer for workout/Chapter 7 bankruptcy 03/30/2014 \$2,750.00 paid 02/26/2015 \$3,014.25 paid 06/02/2016	03/30/2014 02/26/2015 06/02/2016	\$15,764.25

Email or website address

Who made the payment, if not debtor?

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Unknown	2013 Volvo XC90 (VIN: YV4952CY5D1638277); Lien to Volvo Financial of approximately \$19,500	2015	Unknown

Relationship to debtor

13.2	1999 Ford F-250 (VIN: 1FTMX20F2XEE28652); previously titled in the name of Elyse Marie Moore and Michael Ryan Moore and used for business purposes	Late 2014 or early 2015	\$3,000.00
	Gary Moore		

Relationship to debtor  
Managing Member

13.3	2008 Ford E Series Van (VIN: 1FTNE24W08DA62956). Titled in the name of Salem Services Group.	Unknown	\$3,600.00
	Unknown		

Relationship to debtor

13.4	2007 Chevrolet Silverado 2500 (VIN: 1CGHC23K87F563923). Titled in the name of Salem Contracting, Inc.	Unknown	\$1,800.00
	Unknown		

Relationship to debtor

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.5	Unknown	1998 Ford Ranger (VIN: 1FTYR10UoWC38264)	2015	\$1,200.00
	<b>Relationship to debtor</b>			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.  
 Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

No.  
 Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---	------------------------------------	----------------------------------	---	---

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

 None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None

Owner's name and address	Location of the property	Describe the property	Value
Combine Basketball 624-B Matthews-Mint Hill Road Matthews, NC 28105	Salem Services Group, LLC	Security deposit in the amount of \$2,500.00 for sub-lease of office space at 624-B Matthews-Mint Hill Road	\$2,500.00

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.** No. Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?** No. Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
25.1. <b>Salem Services Group, LLC</b> 624 Matthews-Mint Hill Road, Suite A Matthews, NC 28105	<b>General Contractor/Building Restoration</b>	EIN: 45-3563447	From-To 05/07/2010 - 04/2016

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Date of service From-To
26a.1. <b>Davies, Goldstein &amp; Associates CPAs</b> P.O. Box 156 Matthews, NC 28105	2011 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address	If any books of account and records are unavailable, explain why
------------------	--

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address
------------------

26d.1. <b>Internal Revenue Service</b> Attn.: Insolvency Unit P.O. Box 21126 Philadelphia, PA 19114-0326
---

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No  
 Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Gary W. Moore	9417 White Dove Court Charlotte, NC 28277	Managing Member	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No  
 Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No  
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Gary W. Moore 9417 White Dove Court Charlotte, NC 28277	\$1,442.31 weekly	Weekly	Salary
Relationship to debtor <u>Managing Member</u>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Debtor

Salem Services Group, LLC**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 30, 2016/s/ Gary Moore

Signature of individual signing on behalf of the debtor

Gary Moore

Printed name

Position or relationship to debtor Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

 No Yes

**United States Bankruptcy Court**  
**Western District of North Carolina**

In re Salem Services Group, LLC

Debtor(s)

 Case No. 16-30919  
 Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>10,000.00</u>
Prior to the filing of this statement I have received .....	\$ <u>10,000.00</u>
Balance Due .....	\$ <u>0.00</u>

2. \$ 335.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify):

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

**The above legal services are limited by the terms of the fee contract.**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Services/Fees over the contract post petition.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 30, 2016

Date

/s/ David R. Badger

David R. Badger 156

*Signature of Attorney*

David R. Badger, P.A.

2108 South Boulevard

Suite 118, Atherton Lofts

Charlotte, NC 28203

(704) 375-8875 Fax: (704) 375-8835

*Name of law firm*